

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u> Fraction <u>SE 1/4 SE 1/4 SW 1/4 SW 1/4</u>		Section Number <u>34</u> Township No. <u>T 26 S</u> Range Number <u>R 1 E</u>
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ <u>1260' East of Interstate 135 and 50' North of N. Hydraulic Street, Wichita, KS.</u>		Global Positioning System (GPS) information: Latitude: <u>37.73757778</u> (in decimal degrees) Longitude: <u>-97.31304444</u> (in decimal degrees) Elevation: Datum: ☐ WGS 84, ☒ NAD 83, ☐ NAD 27 Collection Method: ☒ GPS unit (Make/Model: <u>Garmin Nuvi</u>) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m
2 WATER WELL OWNER: <u>Union Pacific Railroad</u> RR#, Street Address, Box #: <u>Jeff McDermott</u> City, State, ZIP Code: <u>1400 Douglas Street</u> <u>stop 1030, Omaha, NE 68179-1030</u>		
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N W S 1 mile	4 DEPTH OF COMPLETED WELL <u>21.6</u> ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was..... ft. after..... hours pumping..... gpm EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter <u>4</u> in. to <u>3.0</u> ft. and..... in. to..... ft. WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☒ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No If yes, mo/day/yr sample was submitted..... Water well disinfected? ☐ Yes ☒ No	
5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other..... CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded Casing diameter <u>2</u> in. to <u>11.6</u> ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface..... in., Weight <u>9.3</u> lbs./ft., Wall thickness or gauge No. <u>SAE 80</u> TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☒ Stainless Steel ☐ PVC ☐ Other (Specify)..... ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☒ Wire wrapped ☐ Saw cut ☐ Other (specify)..... SCREEN-PERFORATED INTERVALS: From <u>21.6</u> ft. to <u>14</u> ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft. GRAVEL PACK INTERVALS: From <u>21.6</u> ft. to <u>11</u> ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft.		
6 GROUT MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other..... Grout Intervals: From <u>11</u> ft. to <u>4</u> ft., From..... ft. to..... ft., From..... ft. to..... ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☒ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well <u>Fuel</u> Direction from well..... Distance from well..... FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 0' 15' clay 15' 20' sand 20' 21.6 shale		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) <u>9/9/13</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>597</u> This Water Well Record was completed on (mo/day/year) <u>9-20-13</u> under the business name of <u>Cascade Drilling L.P.</u> by (signature) <u>[Signature]</u> INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html .		

ARCADIS

Sample/Core Log

Boring/Well LW-55

Project/No. 29th Ind. Comm. (P.R.) / KCOO/1648.0001.00003

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Site
Location *at UPRR yard*

Drilling
Started

Drilling
Completed

Total Depth Drilled 21.5 Feet

Hole Diameter 6 inches

Type of Sample/
Coring Device: *Cone beam*

Length and Diameter
of Coring Device

Sampling Interval 10 fee

Land-Surface Elev. 1324 feet

☐ Surveyed ☒ Estimated

Datum 61

Drilling Fluid Used *Potable water*

Drilling Method *Rock Line*

Drilling Contractor Cascade Drilling - Schofield, WI

Driller *Bu* *dukenberger* Helper *Ron* *Walkovic*

Prepared By Larry Benolken

Hammer	Hammer
Weight	Drop

Sample/Core Depth (feet below land surface)	
From	To

Core
Recovery
(feet)

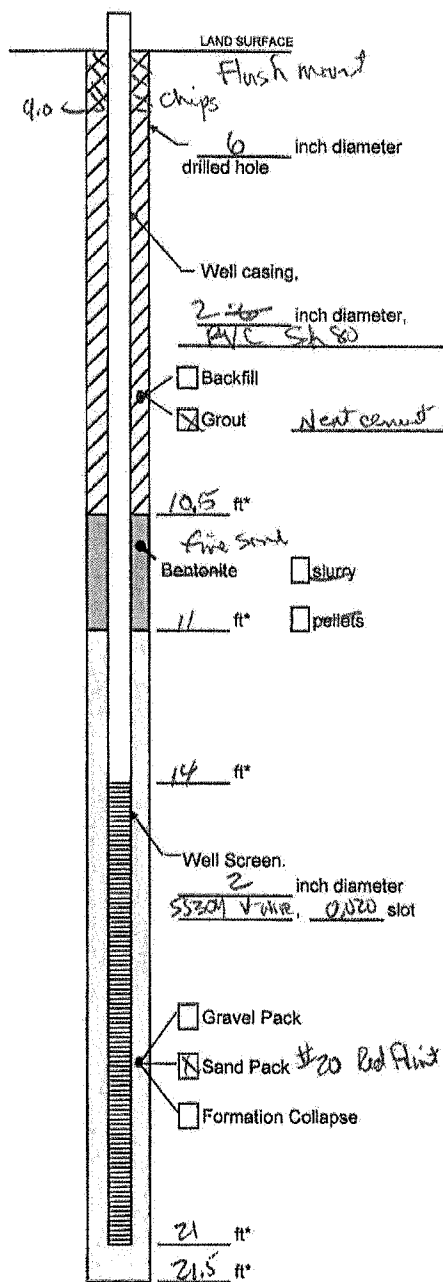
Time/Hydraulic
Pressure or
Blows per 6
Inches

Sample/Core Description

ARCADIS

Well Construction Log

(Unconsolidated)



Measuring Point is
Top of Well Casing
Unless Otherwise Noted.

* Depth Below Land Surface

Project 29th & Grove
KC001648.0001.00003 Well 1W-5S
Town/City Wichita
County Sedgewick State KS
Permit No. _____

Land-Surface (LS) Elevation and Datum:

1324 feet ☐ Surveyed
☒ Estimated

Installation Date(s) 9/1/2013

Drilling Method Rotosonic

Drilling Contractor Cascade Drilling

Drilling Fluid Potable water

Development Technique(s) and Date(s)

Fluid Loss During Drilling 0 gallons

Water Removed During Development _____ gallons

Static Depth to Water _____ feet below M.P.

Pumping Depth to Water _____ feet below M.P.

Pumping Duration _____ hours

Yield _____ gpm Date _____

Specific Capacity _____ gpm/ft

Well Purpose injection testing

Remarks _____

Prepared by Larry Bennett